PTO'S 9 /06 (08-03)
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| PATENT APPLICATION FEE DETERMINATION DESCRIPTION unless d displays a valid OMB control number.   |   |                  |                |              |                     |                  |     |   |                |                |                             |                 |
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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  |   |                  |                |              |                     |                  |     |   |                |                | Annheation of Ducket Number |                 |
| Substitute for Form PTU-875  |   |                  |                |              |                     |                  |     |   |                | $\underline{}$ | 71569                       | 280             |
|  |   | CLAIMS           | S AS FILE      | n _ p        | ARTI                |                  |     | •   |                |                | 1                           |                 |
| l  | CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)  |                  |                |              |                     |                  |     | SMALL   | ENTITY         | Oft            | OTHER THAN                  |                 |
| Г  | (commit) (commit)   |                  |                |              |                     | 7                |     | CIALITY   | •              | SMALL ENTITY   |                             |                 |
| <u> </u>   | FOR NUMBER FILED  |                  |                | ED           | NUMBER EXTRA        |                  |     | RATE  | FEE            | l              |                             |                 |
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|  | (37 CFR 1.16(a)) TOTAL CLAIMS   |                  |                |              |                     |                  | ]   |   | S              | OR             |                             | s               |
|  | CFR 1.16(c))  | ł                | minus 20 =     |              |                     |                  |     |   |                | 1              |                             | <del> </del>    |
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|  |   |                  |                |              |                     | 1                |     | <b></b>   | OR             | x \$ . •       |                             |                 |
| Liu  | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.161d)  |                  |                |              |                     |                  | 1   | + 5 *   | 1              | OR             | +5 .                        | ł               |
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| MQ.  | 18-03   |                  |                |              | (Column 2)          | (Column 3)       | _   | SMALL   | ENTITY         | OR             |                             | ENTITY          |
| ✓  |   | REMAIN           |                |              | HIGHEST<br>NUMBER   | PRESENT          | ı   |   |                | }              |                             |                 |
| ╘  |   | AFTER            |                |              | REVIOUSLY           | EXTRA            | ı   | RATE  | ADDI           | 1              | RATE                        | ADDI-           |
| 旨  |   | AMENDM           | ENT            |              | PAID FOR            |                  | •   |   | TIONAL         | 1              |                             | TIONAL          |
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| 9  | Independent   | <u> </u>         | <del>/  </del> |              |                     | <del>\</del>     | 1   | X Se  |                | OR             | x s=                        |                 |
| Ū  | (37 CFR 1.16(b))  | 6                | Min            | "   "        | Q                   | . /              | l   | xs .  |                | Ì              |                             |                 |
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|  | FIRST PRESEN  | TATION OF MU     | LTIPLE DEP     | MOENT        | CLAIM (37 CF        | R 1,16(d))       | 1   | + 5 =   |                | OR             |                             |                 |
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| ENDMENT  | (37 CFR 1,16(c))  | 0                | Man            | <b>"    </b> | [ ] [               | l. /             |     | x   | <b> </b>       | <u></u>        | X \$ =                      |                 |
| Z  | Independent   | . (-             | Min            | rs ===       |                     | •                | 1   | -   | <del>-/-</del> | OR             | ^• <u> </u>                 |                 |
| AME  | (37 CFR 1.16(D))  | <u> </u>         |                |              |                     |                  |     | X \$=   | <i>/</i> ·     | OR             | X \$=                       |                 |
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| ľ  |   |                  |                |              |                     |                  |     | TOTAL<br>ADO'L FEE                                |                | OR             | TOTAL                       |                 |
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|  |   | (Column 1        | )              |              | (Column 2)          | (Column 3)       |     |   |                |                |                             |                 |
| ပ  |   | CLAIMS           |                |              | HIGHEST             |                  | 1   |   |                |                |                             |                 |
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|  | (37 CFR 1.14(cl)  |                  |                |              |                     |                  | ]   | × \$=   |                | OR             | x s=                        |                 |
|  | Independent<br>(37 OFR 1,16(b))   | 1                | Min            | 5   ""       | 2                   | -                |     |   |                |                |                             |                 |
| AMEN   | <del></del>   |                  |                |              |                     |                  |     | X \$=   |                | OR             | x s=                        |                 |
| ⋖  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(4))   |                  |                |              |                     |                  |     | +5 .  |                | 00             |                             |                 |
|  |   |                  |                |              |                     |                  | •   | TOTAL   | <b></b>        | OR             | # \$ E                      |                 |
| 1  | •   |                  |                |              |                     |                  |     | ADO'L FEE   |                | OR             | ADD'L FEE                   |                 |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |                  |                |              |                     |                  |     |   |                |                |                             |                 |
| " if the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20". "" if the "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3". |   |                  |                |              |                     |                  |     |   |                |                |                             |                 |
| l  | The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                  |                |              |                     |                  |     |   |                |                |                             |                 |
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This collection of information is required by ST CFR 1.16. The information is required to obtain or estain a benefit by the public region. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to late 12 spinutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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|  | MATTON COS OC  | m.   |                  |        | •                      |          |           |                         |  |  |  |
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|  | ICATION FEE DE<br>Ellective Decembe  |  | 086R25/RQ        |        |                        |          |           |                         |  |  |  |
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN   |  |  |                  |        |                        |          |           |                         |  |  |  |
|  | (Column 1)   | 146  |                  | OR     | SHALL                  | ENTITY   |           |                         |  |  |  |
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| MULTIPLE DEPENDENT   | CLAIM PRESENT  | +130                                       | -                | OR     | 1260-                  |          |           |                         |  |  |  |
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